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|  | States Bankr<br>thern District o   |   |   |   |   |   | Volu   | untary Petition  |
|--|--|---|---|---|---|---|--|--|
| Name of Debtor (if individual, enter Last, First, McNeil, Joseph E   | Middle):   |   |   | of Joint De<br>Neil, Bev  | ebtor (Spouse<br>erly J   | e) (Last, First,                                      | Middle):                                       |  |
| All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):   | 3 years  |   |   |   | used by the J<br>maiden, and  |   |  | years  |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  | yer I.D. (ITIN)/Comp   | lete EIN  | (if more  | than one, state   | all)  | r Individual-7  | Taxpayer I.D                                   | O. (ITIN) No./Complete EIN   |
| xxx-xx-8860 Street Address of Debtor (No. and Street, City, a 448 Manistee Ave. Calumet City, IL   | and State):  | ZIP Code  | Street<br>448   | -xx-1504<br>Address of<br>Maniste<br>umet City                          | Joint Debtor<br>e Ave.  | (No. and Str  | reet, City, an                                 | nd State):  ZIP Code   |
| County of Residence or of the Principal Place of   |  | 0409  | Count   | y of Reside   | ence or of the  | Principal Pla   | ace of Busin                                   | 60409<br>ess:  |
| Cook   |  |   | Cod   | •   |   |   |  |  |
| Mailing Address of Debtor (if different from stre  | eet address):  |   | Mailin  | g Address   | of Joint Debt   | tor (if differer                                      | nt from stree                                  | et address):   |
|  |  | ZIP Code  |   |   |   |   |  | ZIP Code   |
| Location of Principal Assets of Business Debtor (if different from street address above):  |  |   |   |   |   |   |  |  |
| Type of Debtor (Form of Organization) (Check one box)  | Nature of  |   |   |   |   | of Bankrup<br>Petition is Fi                          |  | nder Which   |
| Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtors  | ☐ Health Care Busi ☐ Single Asset Rea in 11 U.S.C. § 10 ☐ Railroad ☐ Stockbroker ☐ Commodity Brol ☐ Clearing Bank ☐ Other ☐ Tax-Exen | iness<br>il Estate as de<br>D1 (51B)                | efined  | Chapt Chapt Chapt Chapt Chapt Chapt                                     | er 7<br>er 9<br>er 11<br>er 12  | ☐ Ch<br>of<br>☐ Ch<br>of                              | napter 15 Pe<br>a Foreign M<br>napter 15 Pe    | tition for Recognition  Main Proceeding tition for Recognition  Jonmain Proceeding |
| Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:   |  | if applicable)<br>mpt organizati<br>ne United State | es  | defined<br>"incurr  | are primarily contains 11 U.S.C. § and individual, family, or             | § 101(8) as idual primarily                           |  | ☐ Debts are primarily business debts.  |
| Filing Fee (Check one box  | )  | Check one   |   | nall business   | Chap<br>debtor as defir   | oter 11 Debto   |  | 1  |
| Full Filing Fee attached  Filing Fee to be paid in installments (applicable to attach signed application for the court's consideration debtor is unable to pay fee except in installments. Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration) | on certifying that the Rule 1006(b). See Offician individuals only). Must  | Check all  Check all  Check all  A p  A co          | otor is not<br>otor's aggi-<br>less than s<br>applicable<br>dan is bein | egate nonco<br>\$2,490,925 (as boxes:<br>ag filed with<br>of the plan w | ness debtor as on<br>ntingent liquida<br>amount subject<br>this petition. | defined in 11 U<br>ated debts (exc<br>t to adjustment | J.S.C. § 101(5)<br>luding debts on 4/01/16 and |  |
| Statistical/Administrative Information  ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt proper there will be no funds available for distribution   | erty is excluded and a   | dministrative                                       |   | es paid,  |   | THIS  | SPACE IS FO                                    | OR COURT USE ONLY  |
| 1- 50- 100- 200-   | 1,000- 5,001-  |   | <b>]</b><br>5,001-<br>0,000   | 50,001-<br>100,000  | OVER 100,000  |   |  |  |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 t  | \$1,000,001 \$10,000,001 to \$10 to \$50   | to \$100 to   | ]<br>100,000,001<br>\$500<br>illion                                     | \$500,000,001<br>to \$1 billion   |   |   |  |  |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$550,000 \$100,000 \$500,000 to \$1 t   | \$1,000,001 \$10,000,001 to \$10 to \$50   | to \$100 to   |   | \$500,000,001 to \$1 billion  |   |   |  |  |

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Page 2 Name of Debtor(s): Voluntary Petition McNeil, Joseph E (This page must be completed and filed in every case) McNeil, Beverly J All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: ilnbke 11-40763 10/06/11 Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Marcie Venturini October 19, 2015 Signature of Attorney for Debtor(s) (Date) Marcie Venturini 6203500 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Signatures

## B1 (Official Form 1)(04/13) Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

McNeil, Joseph E

McNeil, Beverly J

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Joseph E McNeil

Signature of Debtor Joseph E McNeil

X /s/ Beverly J McNeil

Signature of Joint Debtor Beverly J McNeil

Telephone Number (If not represented by attorney)

October 19, 2015

Date

#### Signature of Attorney\*

X /s/ Marcie Venturini

Signature of Attorney for Debtor(s)

Marcie Venturini 6203500

Printed Name of Attorney for Debtor(s)

THE SEMRAD LAW FIRM, LLC

Firm Name

20 S. Clark Street

28th Floor

Chicago, IL 60603

Address

Email: rsemrad@semradlaw.com

(312) 913 0625 Fax: (312) 913 0631

Telephone Number

October 19, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

Page 3

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| _   |
|-----|
| v   |
| - 7 |
|     |

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| v |  |
|---|--|

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

| In re | Joseph E McNeil<br>Beverly J McNeil | Case No.          |   |  |
|-------|-------------------------------------|-------------------|---|--|
|       |                                     | Debtor(s) Chapter | 7 |  |

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.  Page 2  | 2   |
|--|-----|
| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or ment deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); | tal |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);  ☐ Active military duty in a military combat zone.   |     |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.  |     |
| I certify under penalty of perjury that the information provided above is true and correct.  |     |
| Signature of Debtor: /s/ Joseph E McNeil  Joseph E McNeil  |     |
| Date: October 19, 2015   |     |

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

| In re | Joseph E McNeil<br>Beverly J McNeil | Case No.          |   |  |
|-------|-------------------------------------|-------------------|---|--|
|       |                                     | Debtor(s) Chapter | 7 |  |

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.   | Page 2   |
|---|--|
| statement.] [Must be accompanied by a motion for a ☐ Incapacity. (Defined in 11 U.S.C. § deficiency so as to be incapable of realizing a responsibilities.);  ☐ Disability. (Defined in 11 U.S.C. § | Inseling briefing because of: [Check the applicable determination by the court.]  § 109(h)(4) as impaired by reason of mental illness or mental and making rational decisions with respect to financial  109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   | in a credit counseling oriening in person, by telephone, or  |
| ☐ Active military duty in a military c  | ombat zone.  |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in  | administrator has determined that the credit counseling this district.   |
| I certify under penalty of perjury that the   | information provided above is true and correct.  |
| Signature of Debtor:  | /s/ Beverly J McNeil  Beverly J McNeil   |
| Date: October 19, 20°   | 15   |

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B6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court Northern District of Illinois**

| In re | Joseph E McNeil, |         | Case No. |   |
|-------|------------------|---------|----------|---|
|       | Beverly J McNeil |         |          |   |
| _     |                  | Debtors | Chapter  | 7 |
|       |                  |         |          |   |

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property  | Yes                  | 1                | 0.00              |             |          |
| B - Personal Property  | Yes                  | 3                | 36,311.00         |             |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 44,117.00   |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 17               |                   | 39,009.55   |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors  | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 2                |                   |             | 4,071.98 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 2                |                   |             | 4,064.00 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 30               |                   |             |          |
|  | T                    | otal Assets      | 36,311.00         |             |          |
|  |                      |                  | Total Liabilities | 83,126.55   |          |

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B 6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court Northern District of Illinois**

| In re | Joseph E McNeil, |         | Case No |   |
|-------|------------------|---------|---------|---|
|       | Beverly J McNeil |         |         |   |
| _     |                  | Debtors | Chapter | 7 |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 12)  | 4,071.98 |
|--|----------|
| Average Expenses (from Schedule J, Line 22)  | 4,064.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 3,692.32 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 13,692.00 |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 39,009.55 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 52,701.55 |

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B6A (Official Form 6A) (12/07)

| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
|       | Beverly J McNeil |          |

Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
|       | Beverly J McNeil |          |

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N O N Description and Location of Property E | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|--|---|---|
| 1.  | Cash on hand  | X  |   |   |
| 2.  | Checking, savings or other financial  | Checking account with TCF                    | W   | 0.00  |
|     | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | Checking account with TCF                    | Н   | 100.00  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X  |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | Furniture                                    | J   | 400.00  |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | x  |   |   |
| 6.  | Wearing apparel.  | mens and womens clothing                     | J   | 350.00  |
| 7.  | Furs and jewelry.   | X  |   |   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X  |   |   |
| 9.  | Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.  | X  |   |   |
| 10. | Annuities. Itemize and name each issuer.  | X  |   |   |
|     |   |  |   |   |
|     |   |  | Sub-Tot                                     | al > 850.00   |

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
|       | Beverly J McNeil |          |

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|                             | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|-----------------------------|---|------------------|--------------------------------------|---|--|
| de<br>un<br>as<br>Gi<br>rec | terests in an education IRA as fined in 26 U.S.C. § 530(b)(1) or der a qualified State tuition plan defined in 26 U.S.C. § 529(b)(1). ive particulars. (File separately the cord(s) of any such interest(s).  U.S.C. § 521(c).) | X                |                                      |   |  |
| otl                         | terests in IRA, ERISA, Keogh, or her pension or profit sharing ans. Give particulars.   | 401              | (k) with employer                    | Н   | 10.00  |
| an                          | ock and interests in incorporated d unincorporated businesses.  | X                |                                      |   |  |
|                             | terests in partnerships or joint entures. Itemize.  | Χ                |                                      |   |  |
| an                          | overnment and corporate bonds and other negotiable and onnegotiable instruments.  | Χ                |                                      |   |  |
| 16. Ac                      | ccounts receivable.   | Χ                |                                      |   |  |
| pro<br>de                   | limony, maintenance, support, and operty settlements to which the btor is or may be entitled. Give articulars.  | X                |                                      |   |  |
|                             | ther liquidated debts owed to debtor cluding tax refunds. Give particulars.   | 201              | 5 anticipated tax refund             | Н   | 3,000.00   |
| Ш                           | cruding tax retuilds. Give particulars.   | 201              | 5 anticipated tax refund             | W   | 1,000.00   |
| est<br>ex<br>de             | quitable or future interests, life tates, and rights or powers ercisable for the benefit of the obtor other than those listed in chedule A - Real Property.   | X                |                                      |   |  |
| int<br>de                   | ontingent and noncontingent<br>terests in estate of a decedent,<br>eath benefit plan, life insurance<br>olicy, or trust.  | X                |                                      |   |  |
| cla<br>tax<br>de            | ther contingent and unliquidated aims of every nature, including x refunds, counterclaims of the obtor, and rights to setoff claims. ive estimated value of each.   | X                |                                      |   |  |
|                             |   |                  | (To                                  | Sub-Tota ot al of this page)                | al > 4,010.00  |

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re Joseph E McNeil, Beverly J McNeil

| Case No. |
|----------|
|----------|

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

| Type of Property  | N<br>O<br>N<br>E | Description and Location of Property               | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemptio |
|---|------------------|--|---|---|
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | Χ                |  |   |   |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | X                |  |   |   |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |  |   |   |
| 25. Automobiles, trucks, trailers, and  | 201              | 2 Buick Enclave with 40,600 // RETAIN              | J   | 16,400.00   |
| other vehicles and accessories.   | 201              | 4 Chevrolet Cruze witth 10,050 miles               | J   | 10,025.00   |
|   |                  | 4 Ford Expedition with 186,000 miles //<br>RRENDER | J   | 2,855.00  |
|   | 200              | 5 Ford Taurus with 105,000 miles // SURRENDER      | J   | 2,171.00  |
| 26. Boats, motors, and accessories.   | Χ                |  |   |   |
| 27. Aircraft and accessories.   | Χ                |  |   |   |
| 28. Office equipment, furnishings, and supplies.  | Χ                |  |   |   |
| 29. Machinery, fixtures, equipment, and supplies used in business.  | Χ                |  |   |   |
| 30. Inventory.  | Χ                |  |   |   |
| 31. Animals.  | Χ                |  |   |   |
| 32. Crops - growing or harvested. Give particulars.   | Χ                |  |   |   |
| 33. Farming equipment and implements.   | Χ                |  |   |   |
| 34. Farm supplies, chemicals, and feed.   | Χ                |  |   |   |
| 35. Other personal property of any kind not already listed. Itemize.  | Х                |  |   |   |
|   |                  | /TD . 1  | Sub-Tota                                    | al > 31,451.00  |
| Sheet 2 of 2 continuation sheets  |                  | (Total   | l of this page)<br>Tot                      | al > 36,311.00  |

Sheet  $\underline{2}$  of  $\underline{2}$  continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
|       | Beverly J McNeil |          |

Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds

\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

| Description of Property  | Specify Law Providing<br>Each Exemption      | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|--|--|----------------------------------|---|
| Checking, Savings, or Other Financial Accounts, Cert Checking account with TCF                         | ificates of Deposit<br>735 ILCS 5/12-1001(b) | 100.00                           | 100.00  |
| Household Goods and Furnishings Furniture  | 735 ILCS 5/12-1001(b)                        | 400.00                           | 400.00  |
| Wearing Apparel mens and womens clothing   | 735 ILCS 5/12-1001(a)                        | 350.00                           | 350.00  |
| Interests in IRA, ERISA, Keogh, or Other Pension or F<br>401(k) with employer                          | Profit Sharing Plans<br>735 ILCS 5/12-1006   | 10.00                            | 10.00   |
| Other Liquidated Debts Owing Debtor Including Tax F<br>2015 anticipated tax refund                     | Ref <u>und</u><br>735 ILCS 5/12-1001(b)      | 3,000.00                         | 3,000.00  |
| 2015 anticipated tax refund  | 735 ILCS 5/12-1001(b)                        | 1,000.00                         | 1,000.00  |
| Automobiles, Trucks, Trailers, and Other Vehicles 2004 Ford Expedition with 186,000 miles // SURRENDER | 735 ILCS 5/12-1001(c)                        | 355.00                           | 2,855.00  |
| 2005 Ford Taurus with 105,000 miles //<br>SURRENDER  | 735 ILCS 5/12-1001(c)                        | 671.00                           | 2,171.00  |

Total: 5,886.00 9,886.00

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B6D (Official Form 6D) (12/07)

| In re | Joseph E McNeil, |  |
|-------|------------------|--|
|       | Beverly J McNeil |  |

Debtors

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

|  | _  | _ |  | _         | _                |       | -  | -                               |  |  |
|--|--|---|--|-----------|------------------|-------|--|---------------------------------|--|--|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR   | 1 | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGEN | LIQUID           | SPUTE | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |  |  |
| Account No. xxxxxxxxxxxx0001   |  |   | Opened 5/01/15 Last Active 9/15/15   | Т         | A<br>T<br>E<br>D |       |  |                                 |  |  |
| 1st Investers<br>380 Interstate North Parkway Sutie 300<br>Atlanta, GA 30339                         |  | J | 2014 Chevrolet Cruze witth 10,050 miles  |           | D                |       |  |                                 |  |  |
|  |  |   | Value \$ 10,025.00   |           |                  |       | 17,314.00  | 7,289.00                        |  |  |
| Account No. xxxxxxxxxx7226   |  |   | Opened 10/01/14 Last Active 8/29/15  |           |                  |       |  |                                 |  |  |
| Gateway One Lending & Finance<br>1601 Riverview Dr Ste 100<br>Anaheim, CA 92808                      |  | Н | 2012 Buick Enclave with 40,600 // RETAIN   |           |                  |       |  |                                 |  |  |
|  |  |   | Value \$ 16,400.00   | 1         |                  |       | 22,803.00  | 6,403.00                        |  |  |
| Account No.  | t  | T | 08/2014  |           |                  |       | ,  |                                 |  |  |
| Titlemax<br>315 E. Roosevelt Road<br>Glen Ellyn, IL 60137-5620                                       |  | J | Title laon 2004 Ford Expedition with 186,000 miles // SURRENDER                                |           |                  |       |  |                                 |  |  |
|  |  |   | Value \$ 2,855.00  |           |                  |       | 2,500.00   | 0.00                            |  |  |
| Account No.  | T  | T | 08/2013  |           |                  |       | ,  |                                 |  |  |
| Titlemax<br>315 E. Roosevelt Road  |  |   | Title loan   |           |                  |       |  |                                 |  |  |
| Glen Ellyn, IL 60137-5620  |  | J | 2005 Ford Taurus with 105,000 miles //<br>SURRENDER  |           |                  |       |  |                                 |  |  |
|  |  |   | Value \$ 2,171.00  | 1         |                  |       | 1,500.00   | 0.00                            |  |  |
| continuation sheets attached   |  |   | S<br>(Total of the   | his       |                  |       | 44,117.00  | 13,692.00                       |  |  |
|  | Total 44,117.00 13,692.00 (Report on Summary of Schedules) |   |  |           |                  |       |  |                                 |  |  |

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B6E (Official Form 6E) (4/13)

| •     |                  |          |  |
|-------|------------------|----------|--|
| In re | Joseph E McNeil, | Case No. |  |
|       | Beverly J McNeil |          |  |
| -     |                  | Debtors  |  |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
|---|
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| □ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
| ☐ Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
| ☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ <b>Deposits by individuals</b> Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).   |
| ☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).  |
| ☐ Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).  |

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Joseph E McNeil, |         | Case No. |
|-------|------------------|---------|----------|
|       | Beverly J McNeil |         |          |
|       |                  | Debtors |          |

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,  | C               | F | usband, Wife, Joint, or Community         |                   | c         | Ų           | D      |                 |
|---|-----------------|---|---|-------------------|-----------|-------------|--------|-----------------|
| MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                     | C O D E B T O R | ľ | CONSIDERATION FOR CLAIM. IF               | CLAIM             | ONTINGENT | 11)         | SPUTED | AMOUNT OF CLAIM |
| Account No. xxxxxx6577  |                 |   | Opened 7/01/12 Last Active 6/18/14        |                   | T         | A<br>T<br>E |        |                 |
| Aaron Sales & Lease Ow<br>Attn: Bankruptcy<br>2800 Canton Road Suite 900<br>Marietta, GA 30066                |                 | V | Lease<br>V                                |                   |           | D           |        | 1.00            |
| Account No. xxxxxx6467  |                 | + | Opened 11/01/06 Last Active 2/28/07       |                   |           |             |        | 1.00            |
| Aaron Sales & Lease Ow<br>1015 Cobb Place Blvd Nw<br>Kennesaw, GA 30144                                       |                 | F | Lease                                     |                   |           |             |        |                 |
|   |                 |   |   |                   |           |             |        | 1.00            |
| Account No. xxxxxx6589  Aaron Sales & Lease Ow 1015 Cobb Place Blvd Nw Kennesaw, GA 30144                     |                 | F | Opened 12/01/06 Last Active 2/27/07 Lease |                   |           |             |        |                 |
|   |                 | L |   |                   |           |             |        | 1.00            |
| Account No. xxxxxx0552  Aaron Sales & Lease Ow Attn: Bankruptcy 2800 Canton Road Suite 900 Marietta, GA 30066 |                 | V | Opened 1/01/14 Last Active 6/18/14 Lease  |                   |           |             |        |                 |
|   |                 |   |   |                   |           |             |        | 1.00            |
| 16 continuation sheets attached   |                 |   |   | S<br>(Total of th |           | tota<br>pag |        | 4.00            |

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| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
| _     | Beverly J McNeil | <u> </u> |

| GD FD FTODIG VALVE  | С        | Īŀ          | Hus         | band, Wife, Joint, or Community   | С           | U           | D |                 |
|---|----------|-------------|-------------|---|-------------|-------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | ⊦<br>∨<br>J | C<br>N<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | ONTINGENT   | L<br>Q<br>I | D | AMOUNT OF CLAIM |
| Account No. xxxxxx6467  |          |             |             | Opened 11/01/06 Last Active 2/28/07   | Т           | E<br>D      |   |                 |
| Aaron Sales & Lease Ow<br>1015 Cobb Place Blvd Nw<br>Kennesaw, GA 30144                           |          | F           | Н           | Lease   |             |             |   | 1.00            |
| Account No. xxxxxx6589  | $\vdash$ | t           | $\dashv$    | Opened 12/01/06 Last Active 2/27/07   | t           |             | T |                 |
| Aaron Sales & Lease Ow<br>1015 Cobb Place Blvd Nw<br>Kennesaw, GA 30144                           |          | F           | н           | Lease   |             |             |   |                 |
| Account No. xxx2363   |          | ļ           | 4           | Opened 4/01/13  | -           | _           | - | 1.00            |
| Ad Astra Rec<br>8918 W 21st St. N Suite 200<br>Mailbox: 112<br>Wichita, KS 67205                  |          | F           |             | Collection Attorney Speedycash.Com 161-II   |             |             |   | 704.00          |
| Account No. xxx2363   | $\vdash$ | +           | $\dashv$    | Opened 4/01/13  |             | +           |   | 784.00          |
| Ad Astra Rec<br>8918 W 21st St. N Suite 200<br>Mailbox: 112<br>Wichita, KS 67205                  |          | F           |             | Collection Attorney Speedycash.Com 161-II   |             |             |   |                 |
| Account No. xxxxxxxxxxxx704A  |          | +           | $\dashv$    | Opened 11/01/12 Last Active 7/22/13   |             | -           |   | 784.00          |
| Amerimark Premier<br>1515 S 21st St<br>Clinton, IA 52732  |          | V           |             | Charge Account  |             |             |   |                 |
|   |          |             |             |   |             |             |   | 117.00          |
| Sheet no1 of _16 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims    |          |             | _           | (Total of   | Sub<br>this |             |   | 1,687.00        |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR UZLLQULDAFED CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE. W CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER C AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. xxxxxxxxxxxxx704A Opened 11/01/12 Last Active 7/22/13 Charge Account Amerimark Premier W 1515 S 21st St Clinton, IA 52732 117.00 Account No. xxxxxx1344 Opened 8/01/14 Last Active 9/12/15 Charge Account **Ashley Stewart** W Comenity Po Box 182124 Columbus, OH 43218 220.00 Account No. xxxxxx1344 Opened 8/01/14 Last Active 9/12/15 Charge Account **Ashley Stewart** W Comenity Po Box 182124 Columbus, OH 43218 220.00 10/2013 Account No. unsecured At & T PO Box 6416 Carol Stream, IL 60197 460.00 Account No. 07/2014 Best Choice 123 payday loan 16 S Park Dr Gloversville, NY 12078 825.00

Sheet no. 2 of 16 sheets attached to Schedule of

Creditors Holding Unsecured Nonpriority Claims

1,842.00

Subtotal

(Total of this page)

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

|   | С        | Īμ     | lusband, Wife, Joint, or Community                            | С               | U             | D        |                 |
|---|----------|--------|---|-----------------|---------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | J<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | O N T I N G E N | N L I Q U L D | I SPUTED | AMOUNT OF CLAIM |
| Account No. xxxxx3449   |          |        | Opened 5/01/04 Last Active 9/26/05                            | Т               | E<br>D        |          |                 |
| Blair<br>Attn: Bankruptcy Department<br>Po Box 182686<br>Columbus, OH 43218                                   |          | V      | Charge Account  |                 |               |          | 1.00            |
| Account No. xxxxx3449   | ╁        | t      | Opened 5/01/04 Last Active 9/26/05                            | +               | $^{+}$        |          |                 |
| Blair<br>Attn: Bankruptcy Department<br>Po Box 182686<br>Columbus, OH 43218                                   |          | V      | Charge Account  |                 |               |          |                 |
| Account No. xxxxxxxxxxx1413   | ┞        | -      | Opened 3/01/11 Last Active 2/11/13                            |                 | -             | -        | 1.00            |
| Capital One Po Box 5253 Carol Stream, IL 60197  |          | F      | Credit Card   |                 |               |          | 1.00            |
| Account No. xxxxxxxxxxxx1413  | ╁        |        | Opened 3/01/11 Last Active 2/11/13                            |                 | +             |          |                 |
| Capital One<br>Po Box 5253<br>Carol Stream, IL 60197  |          | F      | Credit Card   |                 |               |          | 4.00            |
| Account No.   |          |        | 05/2013   |                 |               |          | 1.00            |
| Cash Direct Express<br>300 Creek View<br>Suite 204<br>Newark, DE 19711  | 1        | J      | payday loan   |                 |               |          |                 |
|   |          |        |   |                 |               |          | 600.00          |
| Sheet no. <u>3</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |        | (Total o  | Sub<br>f this   |               |          | 604.00          |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

|   | Гс       | Hu          | sband, Wife, Joint, or Community  |                   | С         | U                     | D |                 |
|---|----------|-------------|---|-------------------|-----------|-----------------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | C<br>H<br>H | DATE CLAIM WAS INCURRED AN<br>CONSIDERATION FOR CLAIM. IF CL<br>IS SUBJECT TO SETOFF, SO STAT | AIM               | CONTINGEN | N L I Q U I D A T E D | 1 | AMOUNT OF CLAIM |
| Account No.   |          |             | 10/2015   |                   | Т         | E                     |   |                 |
| City oF Chicago Water Department<br>PO Box 6330<br>Chicago, IL 60680  |          | J           | unsecured   |                   |           | D                     |   | 250.00          |
| Account No.   | _        |             | 02/2013   |                   |           |                       |   | 250.00          |
| ComEd 3 Lincoln Center Attn: Bankruptcy Section Oakbrook Terrace, IL 60181                                    |          | J           | unsecured   |                   |           |                       |   | 5,000.00        |
| Account No. xxxxxxxxxxx4666   | t        |             | Opened 4/01/14 Last Active 9/01/15  |                   |           |                       |   |                 |
| Comenity Capital Bank/HSN<br>Po Box 182125<br>Columbus, OH 43218  |          | w           | Charge Account  |                   |           |                       |   | 1,110.00        |
| Account No. xxxxxxxxxx4666  | ┢        | _           | Opened 4/01/14 Last Active 9/01/15  |                   |           |                       |   | .,              |
| Comenity Capital Bank/HSN<br>Po Box 182125<br>Columbus, OH 43218  |          | w           | Charge Account  |                   |           |                       |   |                 |
| Account No.   |          |             | 07/2015   |                   |           |                       |   | 1,110.00        |
| Conveergent Outsourcing<br>10750 Hammerly Blvd<br># 200<br>Houston, TX 77043                                  |          | J           | unsecured   |                   |           |                       |   | 911.82          |
| Sharan 4 - £ 40 - h   |          |             |   |                   | 1 :       | <u></u>               |   | 311.02          |
| Sheet no. <u>4</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (T  | Si<br>Fotal of th |           | ota<br>pag            |   | 8,381.82        |

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| In re | Joseph E McNeil, | Case No. |  |
|-------|------------------|----------|--|
|       | Beverly J McNeil |          |  |

#### Debtors

| GD DD 770 D 16 11 1 1 5   | С       | Hu  | sband, Wife, Joint, or Community  |                  | С         | U                | D |                 |
|---|---------|-----|---|------------------|-----------|------------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | ODEBTOR | J C | DATE CLAIM WAS INCURRED A<br>CONSIDERATION FOR CLAIM. IF CI<br>IS SUBJECT TO SETOFF, SO STA | LAIM             | CONTINGEN | I Q U I D        |   | AMOUNT OF CLAIM |
| Account No.   |         |     | 06/2015   |                  | Т         | A<br>T<br>E<br>D |   |                 |
| Conveergent Outsourcing<br>10750 Hammerly Blvd<br># 200<br>Houston, TX 77043                                  |         | J   | unsecured   |                  |           | D                |   | 543.10          |
| Account No. xxxx5059  | t       |     | Opened 6/01/15  |                  |           |                  | Н |                 |
| Credit Management<br>Attention: Bankruptcy Dept<br>Po Box 118288<br>Carrollton, TX 75011                      |         | W   | Collection Attorney Comcast-Chicago   |                  |           |                  |   | 405.00          |
| Account No. xxxx5059  | 1       | _   | Opened 6/04/45  |                  |           |                  |   | 485.00          |
| Credit Management Attention: Bankruptcy Dept Po Box 118288 Carrollton, TX 75011                               |         | W   | Opened 6/01/15 Collection Attorney Comcast-Chicago  |                  |           |                  |   | 485.00          |
| Account No. xxxxxxxxxxxx1476  |         |     | Opened 5/01/14 Last Active 7/19/15  |                  |           |                  |   |                 |
| Credit One Bank Na<br>Po Box 98873<br>Las Vegas, NV 89193   |         | Н   | Credit Card   |                  |           |                  |   |                 |
| Account No. xxxxxxxxxxx1476   | ╀       |     | Opened 5/01/14 Last Active 7/19/15  |                  |           |                  | Н | 702.00          |
| Credit One Bank Na<br>Po Box 98873<br>Las Vegas, NV 89193   |         | Н   | Credit Card   |                  |           |                  |   |                 |
|   |         |     |   |                  |           |                  | Щ | 702.00          |
| Sheet no. <u>5</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |         |     | (   | S<br>Total of th |           | ota<br>pag       |   | 2,917.10        |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

|   | С       | Ho          | sband, Wife, Joint, or Community  |                | сΙ        | u I              | D       |                 |
|---|---------|-------------|---|----------------|-----------|------------------|---------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | ODEBTOR | J<br>H<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | 1              | CONTINGEN | NLLQULDA         | ISPUTED | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxx0001  |         |             | Opened 11/01/14 Last Active 6/09/15   |                | Т         | A<br>T<br>E<br>D |         |                 |
| Crescent Bank And Trus<br>Attn: Bankruptcy<br>Po Box 61813<br>New Orleans, LA 70161                           |         | J           | Automobile  |                |           | U                |         | 1.00            |
| Account No. xxxxxxxxxx0001  |         | $\vdash$    | Opened 11/01/14 Last Active 6/09/15   |                | +         |                  |         |                 |
| Crescent Bank And Trus<br>Attn: Bankruptcy<br>Po Box 61813<br>New Orleans, LA 70161                           |         | J           | Automobile  |                |           |                  |         |                 |
|   |         |             |   |                |           |                  |         | 1.00            |
| Account No. xxxxxxxxxxxx8A4A  Dr Leonards/carol Wrig 1515 S 21st St Clinton, IA 52732                         |         | н           | Opened 9/01/11 Last Active 7/20/15 Charge Account   |                |           |                  |         | 1.00            |
| Account No. xxxxxxxxxxxxx8A4A   |         |             | Opened 9/01/11 Last Active 7/20/15  |                |           |                  |         |                 |
| Dr Leonards/carol Wrig<br>1515 S 21st St<br>Clinton, IA 52732   |         | Н           | Charge Account  |                |           |                  |         | 1.00            |
| Account No.   | ┝       |             | 06/2013   |                | +         |                  |         | 1.00            |
| E-Loan Inc<br>9600 Bryn Mawr Ave<br>Des Plaines, IL 60018   |         | J           | payday loan   |                |           |                  |         |                 |
|   |         |             |   |                |           |                  |         | 400.00          |
| Sheet no. <u>6</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |         |             | (Tota   | Su<br>l of thi | ibto      |                  | - 1     | 404.00          |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

|   | С        | Hu          | sband, Wife, Joint, or Community  |                  | С        | U                | D      |                 |
|---|----------|-------------|---|------------------|----------|------------------|--------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | C<br>H<br>H | DATE CLAIM WAS INCURRED AN<br>CONSIDERATION FOR CLAIM. IF CL<br>IS SUBJECT TO SETOFF, SO STAT | LAIM             | ONTINGEN | I QUID           | SPUTED | AMOUNT OF CLAIM |
| Account No.   |          |             | 08/2014   |                  | Т        | A<br>T<br>E<br>D |        |                 |
| Efinance<br>PO 14245<br>Lenexa, KS 66285  |          | J           | payday loan   |                  |          | D                |        | 000.00          |
| A N   | _        |             | Opened 2/04/44 Leet Notice 4/24/45  |                  |          |                  |        | 600.00          |
| Account No. xxxxxxxxxxxx0690  First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107                      |          | w           | Opened 2/01/14 Last Active 4/24/15 Credit Card  |                  |          |                  |        | 000.00          |
| Account No. xxxxxxxxxxx1719   | -        |             | One and 42/04/42 Leat Asting 5/45/45  |                  |          |                  |        | 632.00          |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57107  |          | Н           | Opened 12/01/12 Last Active 5/15/15  Credit Card  |                  |          |                  |        | 620.00          |
| Account No. xxxxxxxxxxxx0149  | ╁        |             | Opened 1/01/13 Last Active 5/13/15  |                  |          |                  |        |                 |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57107  |          | w           | Credit Card   |                  |          |                  |        |                 |
| Account No. xxxxxxxxxxx0397   |          |             | Opened 6/29/14 Last Active 5/03/15  |                  |          |                  |        | 508.00          |
| First Premier Bank<br>601 S Minnesota Ave<br>Sioux Falls, SD 57104  | -        | Н           | Credit Card   |                  |          |                  |        |                 |
|   |          |             |   |                  |          |                  |        | 494.00          |
| Sheet no. <u>7</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (1  | S<br>Total of th |          | tota<br>pag      |        | 2,854.00        |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

| CDEDITODIS NAME   | С        | Hu          | sband, Wife, Joint, or Community  |                  | С        | U                | D       |                 |
|---|----------|-------------|---|------------------|----------|------------------|---------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | J<br>M<br>H | DATE CLAIM WAS INCURRED AN<br>CONSIDERATION FOR CLAIM. IF CL<br>IS SUBJECT TO SETOFF, SO STAT | LAIM             | ONTINGEN | NLIQUIDA         | ISPUTED | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx0690  |          |             | Opened 2/01/14 Last Active 4/24/15  |                  | Ť        | A<br>T<br>E<br>D |         |                 |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57107  |          | w           | Credit Card   |                  |          | D                |         | 622.00          |
| Account No. xxxxxxxxxxx1719   |          |             | Opened 12/01/12 Last Active 5/15/15   |                  |          |                  |         | 632.00          |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57107  |          | Н           | Credit Card   |                  |          |                  |         |                 |
|   |          |             |   |                  |          |                  |         | 620.00          |
| Account No. xxxxxxxxxxxx0149  |          |             | Opened 1/01/13 Last Active 5/13/15  |                  |          |                  |         |                 |
| First Premier Bank<br>3820 N Louise Ave<br>Sioux Falls, SD 57107  |          | w           | Credit Card   |                  |          |                  |         |                 |
| Account No. xxxxxxxxxxx0397   | ┞        |             | Opened 6/29/14 Last Active 5/03/15  |                  |          |                  |         | 508.00          |
| First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104  |          | Н           | Credit Card   |                  |          |                  |         |                 |
| Account No. xxxx0904  | _        |             | Opened 2/20/06 Last Active 3/31/06  |                  |          |                  |         | 494.00          |
| Hertg Accpt 120 W Lexington Elkhart, IN 46516   |          | н           | Automobile  |                  |          |                  |         |                 |
|   |          |             |   |                  |          |                  |         | 0.00            |
| Sheet no. <u>8</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (*  | S<br>Total of th |          | tota<br>pag      |         | 2,254.00        |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

|   | <u></u>  | T           | امريا        | band, Wife, Joint, or Community   | 1             | 0 1            | υ                | D                |                 |
|---|----------|-------------|--------------|---|---------------|----------------|------------------|------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | F<br>V<br>J | H W J C      | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | 1             | О   I<br>Г   I | N<br>L<br>I<br>Q | I<br>S<br>P<br>U | AMOUNT OF CLAIM |
| Account No. xxxx0901  |          | Τ           |              | Opened 10/17/03 Last Active 3/31/06   |               |                | T<br>E<br>D      |                  |                 |
| Hertg Accpt<br>120 W Lexington<br>Elkhart, IN 46516   |          | F           | H            | Automobile  |               |                | D                |                  | 1.00            |
| Account No. xxxx0904  | ┢        | t           | 1            | Opened 2/20/06 Last Active 3/31/06  |               | +              | 1                |                  |                 |
| Hertg Accpt<br>120 W Lexington<br>Elkhart, IN 46516   |          | F           | H            | Automobile  |               |                |                  |                  |                 |
|   | L        |             |              |   |               |                |                  |                  | 1.00            |
| Account No. xxxx0901  |          |             |              | Opened 10/17/03 Last Active 3/31/06   |               |                |                  |                  |                 |
| Hertg Accpt<br>120 W Lexington<br>Elkhart, IN 46516   |          | F           | H            | Automobile  |               |                |                  |                  |                 |
| Account No. xxxxxxxxxxxx5140  | L        | -           | $\downarrow$ | On an all 40 (04 (07) Least Active 44 (04 (40)  |               | +              | $\downarrow$     |                  | 0.00            |
| Hsbc Bank<br>26525 North Riverwoods Blvd<br>Mettawa, IL 60045   |          | V           |              | Opened 10/01/07 Last Active 11/01/10 Credit Card  |               |                |                  |                  |                 |
| Account No. xxxxxxxxxxxx5140  | _        | 1           | +            | Opened 10/01/07 Last Active 11/01/10  |               | +              | +                | -                | 0.00            |
| Hsbc Bank<br>26525 North Riverwoods Blvd<br>Mettawa, IL 60045   |          | V           |              | Credit Card   |               |                |                  |                  |                 |
|   |          |             |              |   |               |                |                  | _                | 0.00            |
| Sheet no. <u>9</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             |              | (Total o  | Su<br>of this |                |                  |                  | 2.00            |

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| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

|  | 1.                | 1.     |                                    |                  | _      |             | -           |                 |
|--|-------------------|--------|------------------------------------|------------------|--------|-------------|-------------|-----------------|
| CREDITOR'S NAME,<br>MAILING ADDRESS  | COD               | H      | usband, Wife, Joint, or Community  |                  | CON    | U<br>N<br>L | D<br>I<br>S |                 |
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)   | O D E B T O R     | J<br>D | CONSIDERATION FOR CLAIM. IF CL     | LAIM             | ΙE     | LLQULDAT    | SPUTED      | AMOUNT OF CLAIM |
| Account No. xxxxxxx6001  | Γ                 |        | Opened 6/01/15                     |                  | N<br>T | T<br>E<br>D |             |                 |
| IC System<br>Attn: Bankruptcy<br>444 Highway 96 East, Po Box 64378<br>St. Paul, MN 55164                       |                   | F      | Collection Attorney At T Uverse    |                  |        |             |             | 1,260.00        |
| Account No. xxxxxxx6001  | T                 | t      | Opened 6/01/15                     |                  |        |             |             |                 |
| IC System<br>Attn: Bankruptcy<br>444 Highway 96 East, Po Box 64378<br>St. Paul, MN 55164                       |                   | F      | Collection Attorney At T Uverse    |                  |        |             |             | 1,260.00        |
| Account No. xxxxxxxxxxxx6551   | ╁                 | +      | Opened 7/01/15 Last Active 8/14/15 |                  |        |             |             | 1,200.00        |
| Mid America Bank & Tru<br>5109 S Broadband L<br>Sioux Falls, SD 57109  |                   | F      | Credit Card                        |                  |        |             |             |                 |
|  |                   |        |                                    |                  |        |             |             | 348.00          |
| Account No. xxxxxxxxxxxx6551   |                   |        | Opened 7/01/15 Last Active 8/14/15 |                  |        |             |             |                 |
| Mid America Bank & Tru<br>5109 S Broadband L<br>Sioux Falls, SD 57109  |                   | F      | Credit Card                        |                  |        |             |             |                 |
|  |                   |        |                                    |                  |        |             |             | 348.00          |
| Account No.  | $\left\{ \right.$ |        | 08/2014                            |                  |        |             |             |                 |
| My Quick Funds<br>100 Schoolhouse Canyon Rd<br>Santa Ysabel, CA 92070  |                   | J      | payday loan                        |                  |        |             |             |                 |
|  |                   |        |                                    |                  |        |             |             | 600.00          |
| Sheet no. <u>10</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                   |        | C                                  | S<br>Total of th |        | tota<br>pag |             | 3,816.00        |

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| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
| _     | Beverly J McNeil | <u>.</u> |

| CDEDITORIS NA LIE   | С        | Н           | usband, Wife, Joint, or Community                             | С        | U                 | D       |                 |
|---|----------|-------------|---|----------|-------------------|---------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>J<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | ONTINGEN | N L I Q U I D A T | ISPUTED | AMOUNT OF CLAIM |
| Account No. xx8304  |          |             | Opened 4/13/15 Last Active 6/12/15                            | Т        | T<br>E<br>D       |         |                 |
| Oppity Fin<br>11 E. Adams<br>Chicago, IL 60603  |          | F           | Unsecured   |          |                   |         | 1 452 00        |
| Account No. xx8304  | ╀        | ╀           | Opened 4/13/15 Last Active 6/12/15                            | -        | _                 |         | 1,453.00        |
| Oppity Fin 11 E. Adams Chicago, IL 60603  |          | F           | Unsecured   |          |                   |         | 1,453.00        |
| Account No.   | ╁        | $\perp$     | 02/2015   | +        |                   |         | ,               |
| Opportunity Financial<br>4747 W. Peterson Ave<br>Suite 306<br>Chicago, IL 60646                   |          | J           | PAYDAY LOAN   |          |                   |         | 1,300.00        |
| Account No. xxxxxxxxxxx1413   | ╁        | T           | Opened 1/01/14  |          |                   |         |                 |
| Portfolio Recovery<br>Attn: Bankruptcy<br>Po Box 41067<br>Norfolk, VA 23541                       |          | F           | Factoring Company Account Hsbc Bank Nevada N.A.               |          |                   |         | 458.00          |
| Account No. xxxxxxxxxxx1413   | ┞        | $\perp$     | Opened 1/01/14  | +        |                   |         | 438.00          |
| Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541                                |          | F           | Factoring Company Account Hsbc Bank Nevada N.A.               |          |                   |         | 458.00          |
| Sheet no11_ of _16_ sheets attached to Schedule of  | 1        | L           |   | Sub      | tota              | 1       |                 |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of t   |          |                   |         | 5,122.00        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

| CDEDITIONIS MANTE  | С        | T <sub>F</sub> | usband, Wife, Joint, or Community                             | С               | U           |   |                 |
|--|----------|----------------|---|-----------------|-------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)              | CODEBTOR | F<br>V<br>J    | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | O N T I N G E N | LIQUID      | S | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx0459   |          | Γ              | Opened 3/15/07 Last Active 6/29/07                            | Т               | T<br>E<br>D |   |                 |
| Purpln/fbd<br>Five Concourse Par<br>Atlanta, GA 30328  |          | V              | Commercial Line Of Credit                                     |                 |             |   | 0.00            |
| Account No. xxxxxxxxxxxx0459   | ╁        | +              | Opened 3/15/07 Last Active 6/29/07                            | +               | +           |   | 0.00            |
| Purpln/fbd<br>Five Concourse Par<br>Atlanta, GA 30328  |          | V              | Commercial Line Of Credit                                     |                 |             |   |                 |
|  |          |                |   |                 |             |   | 0.00            |
| Account No. xxx1193  Regional Recovery Serv 5252 Hohman Hammond, IN 46325                                      |          | F              | Opened 3/01/13  Collection Attorney Southeastern Medical      |                 |             |   | 217.00          |
| Account No. xxx1193  | ╁        |                | Opened 3/01/13  | +               | +           |   |                 |
| Regional Recovery Serv<br>5252 Hohman<br>Hammond, IN 46325   |          | F              | Collection Attorney Southeastern Medical                      |                 |             |   | 047.00          |
| Account No. xxxx2470   | ╁        | $\frac{1}{1}$  | Opened 6/01/15 Last Active 8/25/15                            | +               | +           |   | 217.00          |
| Southwest Credit Syste<br>4120 International Parkway Suite 1100<br>Carrollton, TX 75007                        |          | F              | Collection Attorney Att Mobility                              |                 |             |   |                 |
|  |          |                |   |                 |             |   | 0.00            |
| Sheet no. <u>12</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                | (Total o  | Sub<br>f this   |             |   | 434.00          |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

| CREDITOR'S NAME,   | C        | Hu     | sband, Wife, Joint, or Community  |              | Ç               | U<br>N      | D |                 |
|--|----------|--------|---|--------------|-----------------|-------------|---|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                               | CODEBTOR | J<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | Í            | 0 N T   N G E N | NLIQUIDATED |   | AMOUNT OF CLAIN |
| Account No. xxxx2470   |          |        | Opened 6/01/15 Last Active 8/25/15  |              | Ť               | Ť           |   |                 |
| Southwest Credit Syste<br>4120 International Parkway Suite 1100<br>Carrollton, TX 75007                        |          | Н      | Collection Attorney Att Mobility  |              |                 | D           |   |                 |
| Account No. xxxxxx1586   |          |        | Opened 7/01/10  | _            | _               |             |   | 0.00            |
| Southwest Recovery Ser<br>15400 Knoll Trail Dr Ste<br>Dallas, TX 75248   | -        | w      | Collection Attorney Vrmi  |              |                 |             |   |                 |
|  |          |        |   |              |                 |             |   | 588.00          |
| Account No. xxxxxx1586   |          |        | Opened 7/01/10  |              |                 |             |   |                 |
| Southwest Recovery Ser<br>15400 Knoll Trail Dr Ste<br>Dallas, TX 75248   |          | w      | Collection Attorney Vrmi  |              |                 |             |   |                 |
| Account No.  | $\vdash$ |        | 02/2015   | _            |                 |             |   | 588.00          |
| Spot Loan<br>PO Box 927<br>Palatine, IL 60078  |          | J      | payday loan   |              |                 |             |   |                 |
|  |          |        |   |              |                 |             |   | 400.00          |
| Account No.  | -        |        | 02/2014   |              |                 |             |   |                 |
| SRA Associates<br>po box 4115<br>Concord, CA 94524   |          | J      | unsecured   |              |                 |             |   |                 |
|  |          |        |   |              |                 |             |   | 2,568.69        |
| Sheet no. <u>13</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |        | (Tota   | Su<br>of thi |                 | ota         |   | 4,144.69        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joseph E McNeil, | Case No |  |
|-------|------------------|---------|--|
|       | Beverly J McNeil |         |  |

#### Debtors

| CDEDITOD'S NAME   | С        | Hu          | sband, Wife, Joint, or Community  |                            |            | J D      |                 |
|---|----------|-------------|---|----------------------------|------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | C<br>1<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | 1<br>1<br>1<br>1<br>1<br>1 |            | DISPUTED | AMOUNT OF CLAIM |
| Account No.   |          |             | 02/2014   |                            | [ ]<br>[ ] |          |                 |
| Stoneberry<br>P.O. Box 2820<br>Monroe, WI 53566   |          | J           | unsecured   |                            |            | ,        | 380.79          |
| Account No.   | ╀        | H           | 04/2015   |                            | +          | +        | 300.73          |
| Sunrise credit Services 260 Airport Plaza PO Box 9100 Farmingdale, NY 11735-9100                              |          | J           | unsecured   |                            |            |          |                 |
|   | _        |             |   |                            | 1          |          | 97.15           |
| Account No.  Sure Advance 750 Shipyeard Drive Wilmington, DE 19801  |          | J           | 06/2013<br>payday loan  |                            |            |          | 400.00          |
| Account No.   | ╫        |             | 12/2012   |                            | +          |          |                 |
| UNV FIDLTY<br>1445 Langham<br>Houston, TX 77084   |          | J           | payday loan   |                            |            |          |                 |
| Account No.   | -        |             | 09/2014   |                            | +          | +        | 800.00          |
| Unversity of Chicago Hospital<br>5841 S. Maryland Avenue<br>Chicago, IL 60637                                 |          | J           | unsecured   |                            |            |          | 707.00          |
|   |          |             |   |                            |            | Ļ        | 797.00          |
| Sheet no. <u>14</u> of <u>16</u> sheets attached to Schedule o Creditors Holding Unsecured Nonpriority Claims | ť        |             | (Total o  | Su<br>of this              |            |          | 2,474.94        |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
|       | Beverly J McNeil |          |

|  | I c      | Тни         | sband, Wife, Joint, or Community  |                  | С | U                | D |                 |
|--|----------|-------------|---|------------------|---|------------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)              | CODEBTOR | H<br>W<br>H | DATE CLAIM WAS INCURRED AI<br>CONSIDERATION FOR CLAIM. IF CI<br>IS SUBJECT TO SETOFF, SO STAT | LAIM             | 0 | Z L Q U L        |   | AMOUNT OF CLAIM |
| Account No.  |          |             | 08/2015   |                  | Т | A<br>T<br>E<br>D |   |                 |
| VISA<br>PO BOX 31594<br>Tampa, FL 33631  |          | J           | unsecure d  |                  |   |                  |   | 330.00          |
| Account No. xxxxxxxxxxx4400  | ╀        |             | Opened 6/01/14 Last Active 9/27/15  |                  |   | _                | Н | 330.00          |
| Webbank/fingerhut<br>6250 Ridgewood Roa<br>Saint Cloud, MN 56303   |          | Н           | Charge Account  |                  |   |                  |   |                 |
|  |          |             |   |                  |   |                  |   | 353.00          |
| Account No. xxxxxxxxxxx4400  Webbank/fingerhut 6250 Ridgewood Roa Saint Cloud, MN 56303                        |          | Н           | Opened 6/01/14 Last Active 9/27/15 Charge Account   |                  |   |                  |   | 353.00          |
| Account No. xxxxxxxxxxxx0433   | ╁        |             | Opened 9/01/15 Last Active 10/09/15   |                  |   |                  | Н |                 |
| Webbank/fingerhut Fres<br>6250 Ridgewood Rd<br>Saint Cloud, MN 56303   |          | W           | Installment Sales Contract  |                  |   |                  |   | 120.00          |
| Account No. xxxxxxxxxxxx0433   | ╀        | $\vdash$    | Opened 9/01/15 Last Active 10/09/15   |                  |   |                  | Н | 129.00          |
| Webbank/fingerhut Fres<br>6250 Ridgewood Rd<br>Saint Cloud, MN 56303   |          | W           | Installment Sales Contract  |                  |   |                  |   |                 |
|  |          |             |   |                  |   |                  | Ц | 129.00          |
| Sheet no. <u>15</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (   | S<br>Total of th |   | tota<br>pag      |   | 1,294.00        |

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| In re | Joseph E McNeil, | Case No |  |
|-------|------------------|---------|--|
|       | Beverly J McNeil |         |  |

| CREDITOR'S NAME,   | CO                         | Hu          | sband, Wife, Joint, or Community  |             | UN               |        | D         |                 |
|--|----------------------------|-------------|---|-------------|------------------|--------|-----------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxxxx4803        | D<br>E<br>B<br>T<br>O<br>R | C<br>J<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Opened 6/01/14 Last Active 9/12/15 | CONTINGENT  | U<br>D<br>A<br>T | ן ו    | SPUTED    | AMOUNT OF CLAIM |
| World Financial Network National Bank<br>Wfnnb<br>Po Box 182686<br>Columbus, OH 43218                          |                            | W           | Charge Account  |             | ED               |        |           | 187.00          |
| Account No. xxxxx4803  | ┢                          | ⊢           | Opened 6/01/14 Last Active 9/12/15  | ╀           | +                | +      | $\dashv$  |                 |
| World Financial Network National Bank Wfnnb Po Box 182686 Columbus, OH 43218                                   | -                          | w           | Charge Account  |             |                  |        |           |                 |
|  |                            |             |   |             |                  |        |           | 187.00          |
| Account No.  |                            |             | 03/2015   | T           | T                |        | $\forall$ |                 |
| Zoom Loan LLC<br>9350 South Dixie Highway, Ste. 1440<br>Miami, FL 33156  |                            | J           | payloan loan  |             |                  |        |           |                 |
|  |                            |             |   |             |                  |        |           | 400.00          |
| Account No.  |                            |             |   |             |                  |        |           |                 |
| Account No.  | H                          | H           |   | +           | +                | $^{+}$ | $\dashv$  |                 |
|  |                            |             |   |             |                  |        |           |                 |
| Sheet no. <u>16</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | -                          |             | (Total of   | Sub<br>this |                  |        |           | 774.00          |
| created Holding Choccared Holiphorty Chains  |                            |             | (10tm of  |             | Tota             |        | t         |                 |
|  |                            |             | (Report on Summary of S   |             |                  |        | - 1       | 39,009.55       |

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B6G (Official Form 6G) (12/07)

| In re | Joseph E McNeil, | Case No. |
|-------|------------------|----------|
|       | Beverly J McNeil |          |

Debtors

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Mack Industries 16800 Oak Park Avenue, #1 Tinley Park, IL 60477 One year residential lease

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B6H (Official Form 6H) (12/07)

| In re | Joseph E McNeil, | Case No |
|-------|------------------|---------|
|       | Beverly J McNeil |         |

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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| Debtor 1 Joseph E N   |  |  |  |
|---|--|--|--|
|   | 1cNeil   |  |  |
| Debtor 2 Beverly J N  | IcNeil   |  |  |
| United States Bankruptcy Court for the  | ne: NORTHERN DISTRIC                           | CT OF ILLINOIS                         |  |
| Case number ((If known)   |  | -                                      | Check if this is:  |
|   |  |  | ☐ An amended filing ☐ A supplement showing post-petition chapter 13 income as of the following date: |
| Official Form B 6I  |  |  | MM / DD/ YYYY  |
| Schedule I: Your Inc  | come   |  | 12/13  |
| Part 1: Describe Employmen  |  |  |  |
| Fill in your employment information.  | <u>t</u>                                       | Debtor 1                               | Debtor 2 or non-filing spouse  |
|   |  | Debtor 1  ■ Employed                   | Debtor 2 or non-filing spouse  ☐ Employed  |
| information.  If you have more than one job, attach a separate page with information about additional   | Employment status                              | _                                      |  |
| information.  If you have more than one job, attach a separate page with information about additional employers.                                  |  | ■ Employed                             | ☐ Employed   |
| information.  If you have more than one job, attach a separate page with information about additional   | Employment status                              | ■ Employed □ Not employed              | ☐ Employed   |
| information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or | Employment status  Occupation  Employer's name | ■ Employed □ Not employed Bun operater | ☐ Employed   |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

|    |     | For Debtor 1 |     | For Debtor 2 or non-filing spouse |  |
|----|-----|--------------|-----|-----------------------------------|--|
|    |     |              |     |                                   |  |
| 2. | \$  | 3,954.58     | \$  | 0.00                              |  |
| 3. | +\$ | 0.00         | +\$ | 0.00                              |  |
|    |     |              |     |                                   |  |
| 4. | \$  | 3,954.58     | \$  | 0.00                              |  |

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Joseph E McNeil Debtor 1 Debtor 2 Beverly J McNeil Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 3.954.58 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 714.18 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 127.88 0.00 **Domestic support obligations** 0.00 5f. 5f. 0.00 5q. **Union dues** 5g. 42.54 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 884.60 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 3,069.98 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8b. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 1.002.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. Pension or retirement income 8g. 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h.+ \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 1,002.00 Calculate monthly income. Add line 7 + line 9. 10. \$ 3.069.98 \$ 1.002.00 \$ 4.071.98 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 4,071.98 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?

|   | INO. |          |
|---|------|----------|
| _ | Yes. | Explain: |

Joseph was on medical leave however now that he will be returning to work he is exepcted to earn around \$4000.00 per month.

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| Fill               | in this informa  | ation to identify yo                                  | our case:                              |  |   |         |  |  |
|--------------------|--|---|--|--|---|---------|--|--|
| Deb                | tor 1  | Joseph E Mc   | Neil                                   |  |   | Che     | eck if this is:                              |  |
|                    |  | -   |  |  |   |         | An amended filing                            |  |
|                    | tor 2  | Beverly J Mc  | Neil                                   |  |   |         |  | wing post-petition chapter                             |
| (Spo               | ouse, if filing)   |   |  |  |   |         | 13 expenses as of                            | the following date:                                    |
| Unit               | ed States Bank   | ruptcy Court for the:                                 | NORTH                                  | ERN DISTRICT OF ILLIN  | OIS                                     |         | MM / DD / YYYY                               |  |
| 1                  | e number<br>nown)  |   |  |  |   |         | A separate filing for 2 maintains a separate | or Debtor 2 because Debto<br>arate household           |
| Of                 | fficial Fo   | orm B 6J  |  |  |   |         |  |  |
|                    |  | J: Your   | Evnor                                  | NCOC   |   |         |  | 12/1:  |
| Be info            | as complete<br>ormation. If n<br>mber (if know                 | and accurate as                                       | s possible<br>eded, atta<br>ry questio | . If two married people and the community is the community and the community is the community in the community in the community is the community in the community in the community is the community in the community in the community is the community in the community in the community is the community in the community in the community is the community in the community in the community is the community in the communi |   |         |  | or supplying correct                                   |
| 1.                 | Is this a joi  | nt case?  |  |  |   |         |  |  |
|                    | ☐ No. Go to  | o line 2.   |  |  |   |         |  |  |
|                    | Yes. Do  | es Debtor 2 live                                      | in a separ                             | ate household?   |   |         |  |  |
|                    |  | lo.   |  |  |   |         |  |  |
|                    |  | -   | st file a sep                          | parate Schedule J.   |   |         |  |  |
| 2.                 | Do you hav   | e dependents?   | ■ No                                   |  |   |         |  |  |
|                    | Do not list Dand Debtor  |   | ☐ Yes.                                 | Fill out this information for each dependent   | Dependent's relation Debtor 1 or Debtor |         | Dependent's age                              | Does dependent live with you?                          |
|                    | Do not state   | the   |  |  |   |         |  | □ No   |
|                    | dependents   | ' names.  |  |  |   |         |  | ☐ Yes  |
|                    |  |   |  |  |   |         |  | □ No   |
|                    |  |   |  |  |   |         |  | ☐ Yes  |
|                    |  |   |  |  |   |         |  | □ No<br>□ Yes  |
|                    |  |   |  |  |   |         |  | □ No   |
|                    |  |   |  |  |   |         |  | ☐ Yes  |
| 3.                 | expenses d   | penses include<br>of people other t<br>d your depende | han $_{\square}$                       | No<br>Yes  |   |         |  |  |
| Esti<br>exp<br>app | imate your e<br>penses as of<br>plicable date.<br>Iude expense | a date after the                                      | our bankr<br>bankruptc<br>non-cash     | uptcy filing date unless y<br>y is filed. If this is a supp<br>government assistance i   | olemental Schedule                      |         |  | apter 13 case to report<br>of the form and fill in the |
|                    | value of suc<br>ficial Form 6                                  |   | d have ind                             | cluded it on Schedule I: `   | Your Income                             |         | Your exp                                     | enses  |
| 4.                 |  | or home owners<br>nd any rent for th                  |  | ses for your residence. I<br>or lot.   | nclude first mortgage                   | e<br>4. | \$   | 1,525.00   |
|                    | If not inclu   | ded in line 4:  |  |  |   |         |  |  |
|                    | 4a. Real   | estate taxes  |  |  |   | 4a.     | \$   | 0.00   |
|                    | •  | erty, homeowner's                                     |  |  |   | 4b.     | · -  | 0.00   |
|                    |  |   |  | upkeep expenses  |   | 4c.     | ·  | 0.00   |
| E                  |  | eowner's associat                                     |  |  | and a mostly of the second              | 4d.     |  | 0.00   |
| 5.                 | Auditional   | mortgage payme  | ents for yo                            | <b>our residence</b> , such as ho  | ine equity loans                        | 5.      | Φ  | 0.00   |

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| Note   | Debtor 1 Joseph E McNeil Debtor 2 Beverly J McNeil Case number (if known) |                   |   |              |            |                              |
|--|---|-------------------|---|--------------|------------|------------------------------|
| 6a.         Electricity, heat, natural gas         6a.         \$         210.00           6b.         Water, sewer, garbage collection         6b.         \$         70.00           6c.         Telephone, cell phone, Internet, satellite, and cable services         6c.         \$         100.00           6d.         Other. Specify:         6d.         \$         0.00           7.         Food and housekeeping supplies         7.         \$         625.00           8.         Childcare and children's education costs         8.         \$         0.00           9.         Clothing, laundry, and dry cleaning         9.         \$         40.00           9.         Personal care products and services         10.         \$         25.00           11.         Medical and dental expenses         11.         \$         0.00           12.         Transportation. Include gas, maintenance, bus or train fare.         12.         \$         300.00           12.         Transportation. Unclude care payments.         13.         \$         0.00           14.         Charitable contributions and religious donations         14.         \$         0.00           15.         Insurance.         15a.         \$         0.00  | 6   | l ltiliti         | as.   |              |            |                              |
| 6b.         Water, sewer, garbage collection         6b.         \$ 70.00           6c.         Telephone, cell phone, Internet, satellite, and cable services         6c.         \$ 100.00           6d.         Other. Specify:         6d.         \$ 0.00           7 Food and housekeeping supplies         7.         \$ 625.00           8.         Childcare and children's education costs         8.         \$ 0.00           9.         Clothing, laundry, and dry cleaning         9.         \$ 40.00           10.         Personal care products and services         10.         \$ 25.00           11.         Medical and dental expenses         11.         \$ 0.00           12.         Transportation. Include gas, maintenance, bus or train fare.         12.         \$ 300.00           12.         Transportation. Include gas, maintenance, bus or train fare.         12.         \$ 300.00           13.         Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$ 0.00           14.         Charitable contributions and religious donations         14.         \$ 0.00           15.         Insurance.         15.         \$ 0.00           15a.         Life insurance deducted from your pay or included in lines 4 or 20.         \$ 297.00         \$ 0.00  | -   | -                 |   | 6a.          | \$         | 210.00                       |
| Sec.   Telephone, cell phone, Internet, satellite, and cable services   6c.   \$ 100.00  |   |                   | · · · · · · · · · · · · · · · · · · ·   |              |            |                              |
| 6d. Other. Specify: 6d. \$ 0.00  |   |                   |   |              | ·          |                              |
| 7. Food and housekeeping supplies         7. \$         625.00           8. Childcare and children's education costs         8. \$         0.00           9. Clothing, laundry, and dry cleaning         9. \$         40.00           10. Personal care products and services         10. \$         25.00           11. Medical and dental expenses         11. \$         0.00           12. Transportation. Include gas, maintenance, bus or train fare.   |   |                   |   |              | ·          |                              |
| 8. Childcare and children's education costs         8. \$         0.00           9. Clothing, laundry, and dry cleaning         9. \$         40.00           10. Personal care products and services         10. \$         25.00           11. Medical and dental expenses         11. \$         0.00           12. Transportation. Include gas, maintenance, bus or train fare.  | 7.  | Food              |   |              | ·          |                              |
| 9. Clothing, laundry, and dry cleaning         9. \$         40.00           10. Personal care products and services         10. \$         25.00           11. Medical and dental expenses         11. \$         0.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.         12. \$         300.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$         0.00           14. Charitable contributions and religious donations         14. \$         0.00           15. Insurance.         5         0.00           15. Insurance.         15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a. \$         0.00           15b. Health insurance         15b. \$         0.00           15c. Vehicle insurance         15c. \$         297.00           15d. Other insurance. Specify:         15d. \$         0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         5pecify:         16. \$         0.00           17. Installment or lease payments:         17a. \$         475.00           17b. Car payments for Vehicle 1         17a. \$         475.00           17c. Other. Specify:         17c. Other. Specify:         0.00   |   |                   |   |              | ·          |                              |
| 10. Personal care products and services       10. \$       25.00         11. Medical and dental expenses       11. \$       0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12. \$       300.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$       0.00         14. Charitable contributions and religious donations       14. \$       0.00         15. Insurance.       0 not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       297.00         15d. Other insurance. Specify:       15d. \$       0.00         15 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       15c. \$       0.00         15 Installment or lease payments:       17a. \$       475.00         17b. Car payments for Vehicle 1       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   |                   |   |              | ·          |                              |
| 11.       Medical and dental expenses       11.       \$       0.00         12.       Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12.       \$       300.00         13.       Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$       0.00         14.       Charitable contributions and religious donations       14.       \$       0.00         15.       Insurance.       Do not include insurance deducted from your pay or included in lines 4 or 20.       15a.       \$       0.00         15a.       Life insurance       15b.       \$       0.00         15b.       Health insurance       15c.       \$       0.00         15c.       Vehicle insurance. Specify:       15c.       \$       0.00         15d.       Other insurance. Specify:       15d.       \$       0.00         16.       Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$       0.00         17c.       Installment or lease payments:       16.       \$       0.00         17c.       Car payments for Vehicle 1       17a.       \$       475.00         17b.       Car payments for Vehicle 2       17b.       \$       0.00         17c.  |   |                   |   |              | ·          |                              |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12. \$       300.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$       0.00         14. Charitable contributions and religious donations       14. \$       0.00         15. Insurance.       0.00       0.00         15a. Life insurance deducted from your pay or included in lines 4 or 20.       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       297.00         15d. Other insurance. Specify:       15d. \$       0.00         15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5       0.00         15. Installment or lease payments:       16. \$       0.00         17. Installment or lease payments:       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00  |   |                   | •   |              | · : ———    | -                            |
| Do not include car payments.   12. \$   300.00   |   |                   | •   |              | ·          |                              |
| 14. Charitable contributions and religious donations       14. \$       0.00         15. Insurance.       Do not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       297.00         15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5pecify:       16. \$       0.00         17. Installment or lease payments:       17a. \$       475.00         17b. Car payments for Vehicle 1       17a. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   |                   |   | 12.          | \$         | 300.00                       |
| 15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Specify:  1 | 13.   | Enter             | tainment, clubs, recreation, newspapers, magazines, and books   | 13.          | \$         | 0.00                         |
| Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance  | 14.   | Chari             | table contributions and religious donations   | 14.          | \$         | 0.00                         |
| 15a. Life insurance       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       297.00         15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5       0.00         17. Installment or lease payments:       16. \$       0.00         17a. Car payments for Vehicle 1       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00   | 15.   | Insur             | ance.   |              |            |                              |
| 15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       297.00         15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       16. \$       0.00         17. Installment or lease payments:       17a. \$       475.00         17b. Car payments for Vehicle 1       17a. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   |                   |   |              |            |                              |
| 15c. Vehicle insurance       15c. \$       297.00         15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16. \$       0.00         17. Installment or lease payments:       17a. Car payments for Vehicle 1       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   |                   |   |              | ·          |                              |
| 15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16. \$       0.00         17. Installment or lease payments:       17a. Car payments for Vehicle 1       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   | 15b.              | Health insurance  | 15b.         | \$         |                              |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16. \$       0.00         17. Installment or lease payments:       17a. Car payments for Vehicle 1       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   | 15c.              | Vehicle insurance   |              | ·          | 297.00                       |
| Specify:         16. \$         0.00           17. Installment or lease payments:         17a. Car payments for Vehicle 1         17a. \$         475.00           17b. Car payments for Vehicle 2         17b. \$         397.00           17c. Other. Specify:         17c. \$         0.00  |   |                   | · · ·   | 15d.         | \$         | 0.00                         |
| 17a. Car payments for Vehicle 1       17a. \$       475.00         17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00  |   |                   | , , ,   | 16.          | \$         | 0.00                         |
| 17b. Car payments for Vehicle 2       17b. \$       397.00         17c. Other. Specify:       17c. \$       0.00   |   |                   |   |              |            |                              |
| 17c. Other. Specify: 17c. \$ 0.00  |   |                   |   | 17a.         | \$         |                              |
|  |   | 17b.              | Car payments for Vehicle 2  | 17b.         | \$         | 397.00                       |
|  |   | 17c.              | Other. Specify:   | 17c.         | \$         | 0.00                         |
|  |   |                   |   |              | \$         | 0.00                         |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6I).   |   |                   |   | <b>s</b> 18. | \$         | 0.00                         |
| 19. Other payments you make to support others who do not live with you. \$ 0.00  | 19.   | Other             | r payments you make to support others who do not live with you.   |              | \$         | 0.00                         |
| Specify: 19.   |   | Speci             | fy:   | 19.          |            |                              |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  |   |                   |   |              |            |                              |
| 20a. Mortgages on other property 20a. \$ 0.00  |   | 20a.              | Mortgages on other property   |              | · <u> </u> |                              |
| 20b. Real estate taxes 20b. \$ 0.00  |   | 20b.              | Real estate taxes   | 20b.         | \$         |                              |
| 20c. Property, homeowner's, or renter's insurance 20c. \$  |   |                   | • • •   | 20c.         | \$         | 0.00                         |
| 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00   |   | 20d.              | Maintenance, repair, and upkeep expenses  | 20d.         | \$         |                              |
| 20e. Homeowner's association or condominium dues 20e. \$ 0.00  |   | 20e.              | Homeowner's association or condominium dues   | 20e.         | \$         | 0.00                         |
| 21. <b>Other:</b> Specify: 21. +\$ 0.00  | 21.   | Other             | r: Specify:   | 21.          | +\$        | 0.00                         |
| 22. Your monthly expenses. Add lines 4 through 21.  The result is your monthly expenses.   |   |                   | , ,   | 22.          | \$         | 4,064.00                     |
| The result is your monthly expenses.  23. Calculate your monthly net income.   |   |                   |   |              |            |                              |
| 23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I. 23a. \$ 4,071.98  |   |                   |   | 232          | \$         | 4 071 09                     |
| 23b. Copy your monthly expenses from line 22 above. 23b\$ 4,064.00   |   |                   | •   |              | ·          |                              |
| 255. Copy you monthly expenses normalic 22 above.  |   | 200.              | copy your monthly expenses from the 22 above.   | 200.         | Ψ          | 4,004.00                     |
| 23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .  23c. \$\\$ 7.98   |   | 23c.              |   | 23c.         | \$         | 7.98                         |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.   |   | For ex<br>modific | ample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage? |              |            | ase or decrease because of a |
| ☐ Yes. Explain:  |   |                   |   |              |            |                              |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

Date October 19, 2015

Date October 19, 2015

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Joseph E McNeil<br>Beverly J McNeil      |                                   | Case No.         |               |
|-------|--|-----------------------------------|------------------|---------------|
|       |  | Debtor(s)                         | Chapter          | 7             |
|       |  |                                   |                  |               |
|       |  |                                   |                  |               |
|       | DECLADATION C                            | ONCERNING DEBTOR'S                | e echebin        | EC            |
|       | DECLARATION C                            | ONCERNING DEDIOR                  | S SCHEDUL        | LS            |
|       | DECL AD AFTON ANDER 1                    |                                   |                  | OTTO D        |
|       | DECLARATION UNDER                        | PENALTY OF PERJURY BY IN          | DIVIDUAL DEI     | STOR          |
|       |  |                                   |                  |               |
|       |  |                                   |                  |               |
|       | I declare under penalty of perjury the   | hat I have read the foregoing sum | mary and schadul | as consisting |
|       | of 32 sheets, and that they are true and |                                   |                  |               |
|       | <u></u> , , , ,                          |                                   | B-,, -           |               |
|       |  |                                   |                  |               |
|       |  |                                   |                  |               |

Signature

Signature

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

/s/ Joseph E McNeil
Joseph E McNeil

/s/ Beverly J McNeil Beverly J McNeil Joint Debtor Case 15-35535 Doc 1 Filed 10/19/15 Entered 10/19/15 18:21:00 Desc Main Document Page 41 of 61

B7 (Official Form 7) (04/13)

## **United States Bankruptcy Court**Northern District of Illinois

|       | Joseph E McNeil  |           |          |   |
|-------|------------------|-----------|----------|---|
| In re | Beverly J McNeil |           | Case No. |   |
|       |                  | Debtor(s) | Chapter  | 7 |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| \$26,377.08 | 2015 YTD: Estimated Employment Income |
|-------------|---------------------------------------|
| \$53,468.00 | 2014: Estimated Employment Income     |
| \$61,223.00 | 2013: Estimated Employment Income     |
| \$14,008.00 | 2013: Wife Employment Income          |

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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| AMOUNT<br>\$12,944.98 | SOURCE<br>2015 YTD: Workmans Compensation |
|-----------------------|---|
| \$9,018.00            | 2015 YTD: Wife Social Security            |
| \$12,024.00           | 2014: Wife Social Security                |
| \$12,024.00           | 2013: Wife Social Security                |
| \$6,982.00            | 2014: Wife Unemployment                   |
| \$11,754.00           | 2015 YTD: Husband IRA                     |
| \$3,605.00            | 2014: Husband IRA                         |

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

PROCEEDING
Mack industries v. McNeil Joseph & Beverly

NATURE OF
PROCEEDING
AND LOCATION
Municipal division

COURT OR AGENCY
AND LOCATION
DISPOSITION
Municipal division

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None 1

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

 Date
 October 19, 2015
 Signature
 /s/ Joseph E McNeil

 Date
 October 19, 2015
 Signature
 /s/ Beverly J McNeil

 Beverly J McNeil
 Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

## **United States Bankruptcy Court Northern District of Illinois**

| In re | Joseph E McNeil<br>Beverly J McNeil |           | Case No. |   |
|-------|-------------------------------------|-----------|----------|---|
|       |                                     | Debtor(s) | Chapter  | 7 |

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

| property of the estate. Attach additional pages if her  | cessai y.)   |
|---|--|
| Property No. 1  |  |
| Creditor's Name: 1st Investers  | Describe Property Securing Debt:<br>2014 Chevrolet Cruze witth 10,050 miles  |
| Property will be (check one):   |  |
| ☐ Surrendered ■ Retained  |  |
| If retaining the property, I intend to (check at least one):  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain (for example, avoid | oid lien using 11 U.S.C. § 522(f)).  |
| Property is (check one):  |  |
| ☐ Claimed as Exempt   | ■ Not claimed as exempt  |
| Property No. 2  |  |
| Creditor's Name: Gateway One Lending & Finance  | Describe Property Securing Debt:<br>2012 Buick Enclave with 40,600 // RETAIN |
| Property will be (check one):   |  |
| ☐ Surrendered ■ Retained  |  |
| If retaining the property, I intend to (check at least one):  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain (for example, avoid | oid lien using 11 U.S.C. § 522(f)).  |
| Property is (check one):  |  |
| ☐ Claimed as Exempt   | Not claimed as exempt  |

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| B8 (Form 8) (12/08)  |   |   | Page 2  |
|--|---|---|---|
| Property No. 3   |   |   |   |
| Creditor's Name: Titlemax  |   | Describe Property S<br>2004 Ford Expedition | ecuring Debt: with 186,000 miles // SURRENDER |
| Property will be (check one):  |   |   |   |
| ■ Surrendered  | ☐ Retained                                    |   |   |
| If retaining the property, I intend to (check a ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain |   | id lien using 11 U.S.C.                     | § 522(f)).                                    |
| Property is (check one):   |   |   |   |
| ■ Claimed as Exempt  |   | ☐ Not claimed as exe                        | empt  |
| Property No. 4   |   |   |   |
| Creditor's Name:<br>Titlemax   |   |   |   |
| Property will be (check one): ■ Surrendered  | ☐ Retained                                    |   |   |
| If retaining the property, I intend to (check a ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain |   | id lien using 11 U.S.C.                     | § 522(f)).                                    |
| ■ Claimed as Exempt  |   | ☐ Not claimed as exe                        | mpt   |
| PART B - Personal property subject to unexp<br>Attach additional pages if necessary.)<br>Property No. 1    | pired leases. (All three                      | columns of Part B mus                       | st be completed for each unexpired lease.     |
| Lessor's Name:<br>Mack Industries  | Describe Leased Pro<br>One year residential l |   |   |

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

| Date | October 19, 2015 | Signature | /s/ Joseph E McNeil Joseph E McNeil Debtor         |
|------|------------------|-----------|--|
| Date | October 19, 2015 | Signature | /s/ Beverly J McNeil Beverly J McNeil Joint Debtor |

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## United States Bankruptcy Court Northern District of Illinois

| In re        | Joseph E McNeil<br>Beverly J McNeil   |  | Case No.  |                                     |
|--------------|---|--|---|-------------------------------------|
|              |   | Debtor(s)  | Chapter   | 7                                   |
|              | DISCLOSURE OF COMPENSAT   | TON OF ATTOI   | RNEY FOR DE                                       | CBTOR(S)                            |
| c            | ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I compensation paid to me within one year before the filing of the e rendered on behalf of the debtor(s) in contemplation of or in or                                      | petition in bankruptcy,  | or agreed to be paid                              | to me, for services rendered or to  |
|              | For legal services, I have agreed to accept   |  | \$  | 1,465.00                            |
|              | Prior to the filing of this statement I have received   |  | \$  | 0.00                                |
|              | Balance Due   |  | \$  | 1,465.00                            |
| 2. T         | he source of the compensation paid to me was:   |  |   |                                     |
|              | ■ Debtor □ Other (specify):   |  |   |                                     |
| 3. T         | he source of compensation to be paid to me is:  |  |   |                                     |
|              | ■ Debtor □ Other (specify):   |  |   |                                     |
| <b>4</b> . ■ | I have not agreed to share the above-disclosed compensation   | n with any other person  | unless they are meml                              | bers and associates of my law firm. |
|              | I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the  |  |   |                                     |
| 5. I         | n return for the above-disclosed fee, I have agreed to render leg   | gal service for all aspect   | s of the bankruptcy c                             | ase, including:                     |
| b.<br>c.     | Analysis of the debtor's financial situation, and rendering adv<br>Preparation and filing of any petition, schedules, statement of<br>Representation of the debtor at the meeting of creditors and of<br>[Other provisions as needed] | f affairs and plan which   | may be required;                                  |                                     |
| 6. B         | y agreement with the debtor(s), the above-disclosed fee does no   | ot include the following   | g service:  |                                     |
|              | CER   | TIFICATION   |   |                                     |
|              | certify that the foregoing is a complete statement of any agreen nkruptcy proceeding.   | nent or arrangement for  | payment to me for re                              | epresentation of the debtor(s) in   |
| Dated:       | October 19, 2015  | /s/ Marcie Venturiri<br>Marcie Venturini 6<br>THE SEMRAD LA<br>20 S. Clark Street<br>28th Floor<br>Chicago, IL 60603<br>(312) 913 0625 Frsemrad@semrad | 203500<br>W FIRM, LLC<br>S<br>Fax: (312) 913 0631 |                                     |

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Joseph & Beverly McNeil Matter Number 123571-003 Initial: JM JS

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 10/16/15

ent auch Mafe Client

Attorney

Initial: (Van

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

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a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

### **United States Bankruptcy Court** Northern District of Illinois

|  | Joseph E McNeil               |                                    |                            |                  |  |  |  |  |
|--|-------------------------------|------------------------------------|----------------------------|------------------|--|--|--|--|
| In re  | Beverly J McNeil              |                                    | Case No.                   |                  |  |  |  |  |
|  |                               | Debtor(s)                          | Chapter                    | 7                |  |  |  |  |
|  | CERTIFICATION OF UNDER § 342( | F NOTICE TO COM<br>b) OF THE BANKE |                            | R(S)             |  |  |  |  |
| Certification of Debtor  I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code. |                               |                                    |                            |                  |  |  |  |  |
| Joseph   | n E McNeil                    |                                    |                            |                  |  |  |  |  |
| Beverly J McNeil   |                               | X /s/ Jose                         | ph E McNeil                | October 19, 2015 |  |  |  |  |
| Printed Name(s) of Debtor(s)   |                               | Signatu                            | re of Debtor               | Date             |  |  |  |  |
| Case No. (if known)  |                               | X /s/ Beve                         | erly J McNeil              | October 19, 2015 |  |  |  |  |
|  |                               | Signatu                            | re of Joint Debtor (if any | ) Date           |  |  |  |  |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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## United States Bankruptcy Court Northern District of Illinois

|       | Joseph E McNeil                              |  |                  |                           |  |  |
|-------|--|--|------------------|---------------------------|--|--|
| In re | Beverly J McNeil                             |  | Case No.         |                           |  |  |
|       |  | Debtor(s)                              | Chapter          | 7                         |  |  |
|       |  |  |                  |                           |  |  |
|       | VERIFICATION OF CREDITOR MATRIX              |  |                  |                           |  |  |
|       | Number of Creditors:                         |  | 86               |                           |  |  |
|       | The above-named Debtor(s) h (our) knowledge. | ereby verifies that the list of credit | tors is true and | correct to the best of my |  |  |
| Date: | October 19, 2015                             | /s/ Joseph E McNeil                    |                  |                           |  |  |
|       |  | Joseph E McNeil                        | •                |                           |  |  |
|       |  | Signature of Debtor                    |                  |                           |  |  |
| Date: | October 19, 2015                             | /s/ Beverly J McNeil                   |                  |                           |  |  |
|       |  | Beverly J McNeil                       |                  |                           |  |  |
|       |  | Signature of Debtor                    |                  |                           |  |  |

1st Investoase 15-35535 Doc 1 A Hedino 19/15 reminered 10/19/15 18:21:00 O Descipair Water De 380 Interstate North Parkway Shipper Page 59 of 61 PO Box 6330 Atlanta, GA 30339 Clinton, IA 52732 Chicago, IL 60680

Aaron Sales & Lease Ow Ashley Stewart ComEd
Attn: Bankruptcy Comenity 3 Lincoln Center
2800 Canton Road Suite 900 Po Box 182124 Attn: Bankruptcy Section
Columbus, OH 43218 Oakbrook Terrace, IL 601

Aaron Sales & Lease Ow 1015 Cobb Place Blvd Nw Kennesaw, GA 30144

Ashley Stewart Comenity Po Box 182124 Columbus, OH 43218

Comenity Capital Bank/HS Po Box 182125 Columbus, OH 43218

Aaron Sales & Lease Ow At & T Comenity Capital Ba 1015 Cobb Place Blvd Nw PO Box 6416 Po Box 182125 Kennesaw, GA 30144 Carol Stream, IL 60197 Columbus, OH 43218

Comenity Capital Bank/HS Po Box 182125

Aaron Sales & Lease Ow Best Choice 123
Attn: Bankruptcy 16 S Park Dr 2800 Canton Road Suite 900 Gloversville, NY 12078 Marietta, GA 30066

Conveergent Outsourcing 10750 Hammerly Blvd # 200 Houston, TX 77043

Kennesaw, GA 30144

Aaron Sales & Lease Ow Blair Conveergent Outsour 1015 Cobb Place Blvd Nw Attn: Bankruptcy Department 10750 Hammerly Blvd Po Box 182686 Columbus, OH 43218

Conveergent Outsourcing # 200 Houston, TX 77043

Aaron Sales & Lease Ow Blair 1015 Cobb Place Blvd Nw Kennesaw, GA 30144

Attn: Bankruptcy Department Attention: Bankruptcy De Po Box 182686 Po Box 118288
Columbus, OH 43218 Carrollton, TX 75011 Po Box 182686

Credit Management

Ad Astra Rec Capital One 8918 W 21st St. N Suite 200 Po Box 5253 Mailbox: 112 Wichita, KS 67205

Carol Stream, IL 60197

Credit Management Attention: Bankruptcy De Po Box 118288 Carrollton, TX 75011

Ad Astra Rec 8918 W 21st St. N Suite 200 Po Box 5253 Mailbox: 112 Wichita, KS 67205

Capital One Carol Stream, IL 60197 Las Vegas, NV 89193

Credit One Bank Na Po Box 98873

Amerimark Premier 1515 S 21st St Clinton, IA 52732 Cash Direct Express 300 Creek View Suite 204 Newark, DE 19711

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Crescent PCase 45-35535 Doc 1
Attn: Bankruptcy
PO BOX 61813

Doc 1
Sioux Falls, SD 57107

Activated 10/19/15 18:25:00 B Desc Main
26525 North Riverwoods Bl
Mettawa, IL 60045 New Orleans, LA 70161 Crescent Bank And Trus First Premier Bank IC System
Attn: Bankruptcy 3820 N Louise Ave Attn: Bankruptcy
Po Box 61813 Sioux Falls, SD 57107 444 Highway 96 East, Po B6
New Orleans, LA 70161 St. Paul, MN 55164 Dr Leonards/carol Wrig
1515 S 21st St
Clinton, IA 52732

Sioux Falls, SD 57107

TC System
Attn: Bankruptcy
444 Highway 96 East, Po B6
St. Paul, MN 55164 St. Paul, MN 55164 Dr Leonards/carol Wrig First Premier Bank Mid America Bank & Tru 1515 S 21st St 601 S Minnesota Ave 5109 S Broadband L Clinton, IA 52732 Sioux Falls, SD 57104 Sioux Falls, SD 57109 E-Loan Inc
9600 Bryn Mawr Ave
Des Plaines, IL 60018

Gateway One Lending & FinanceMid America Bank & Tru
1601 Riverview Dr Ste 100
Anaheim, CA 92808

Sioux Falls, SD 57109 Efinance Hertg Accpt My Quick Funds
PO 14245 120 W Lexington 100 Schoolhouse Canyon Rd
Lenexa, KS 66285 Elkhart, IN 46516 Santa Ysabel, CA 92070 First Premier Bank Hertg Accpt Oppity Fin 3820 N Louise Ave 120 W Lexington 11 E. Adams Sioux Falls, SD 57107 Elkhart, IN 46516 Chicago, IL 60603 First Premier Bank Hertg Accpt Oppity Fin 3820 N Louise Ave 120 W Lexington 11 E. Adams Sioux Falls, SD 57107 Elkhart, IN 46516 Chicago, IL 60 Chicago, IL 60603 First Premier Bank Hertg Accpt Opportunity Financial 3820 N Louise Ave 120 W Lexington 4747 W. Peterson Ave Sioux Falls, SD 57107 Elkhart, IN 46516 Suite 306 Chicago, IL 60646 First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104
Hsbc Bank
26525 North Riverwoods Blvd
Mettawa, IL 60045
Portfolio Recovery
Attn: Bankruptcy
Po Box 41067
Norfolk, VA 23541 Portfolio Recovery

Norfolk, VA 23541

Norfolk, VA 23541

Portfolio Case 15-35535 Doc 1 Atn: Bankruptcy Po Box 41067 Doc 1 Concord, CA 94524 Saint Cloud, MN 56

Saint Cloud, MN 56303

Purpln/fbd

Five Concourse Par Atlanta, GA 30328

Stoneberry P.O. Box 2820 Monroe, WI 53566 Webbank/fingerhut Fres 6250 Ridgewood Rd Saint Cloud, MN 56303

Purpln/fbd Five Concourse Par Atlanta, GA 30328

Sunrise credit Services 260 Airport Plaza PO Box 9100 Farmingdale, NY 11735-9100 Webbank/fingerhut Fres 6250 Ridgewood Rd Saint Cloud, MN 56303

Regional Recovery Serv

5252 Hohman 5252 Hohman Hammond, IN 46325 Sure Advance 750 Shipyeard Drive Wilmington, DE 19801

World Financial Network B Wfnnb Po Box 182686 Columbus, OH 43218

Regional Recovery Serv

5252 Hohman Hammond, IN 46325 Titlemax 315 E. Roosevelt Road Glen Ellyn, IL 60137-5620

World Financial Network B Po Box 182686

Columbus, OH 43218

Southwest Credit Syste Titlemax 4120 International Parkway SuBle ELORoosevelt Road Carrollton, TX 75007 Glen Ellyn, IL 60137-5620

Zoom Loan LLC 9350 South Dixie Highway \$ Miami, FL 33156

Southwest Credit Syste UNV FIDLTY 4120 International Parkway Suited 5 1000 gham Carrollton, TX 75007 Houston, TX 77084

Southwest Recovery Ser 15400 Knoll Trail Dr Ste Dallas, TX 75248

Unversity of Chicago Hospital 5841 S. Maryland Avenue Chicago, IL 60637

Southwest Recovery Ser 15400 Knoll Trail Dr Ste Dallas, TX 75248

VISA PO BOX 31594 Tampa, FL 33631

Spot Loan PO Box 927 Palatine, IL 60078 Webbank/fingerhut 6250 Ridgewood Roa Saint Cloud, MN 56303